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## BIB DATA SHEET

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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*

This application is a 371 of PCT/JP04/05072 04/08/2004

## \*\* FOREIGN APPLICATIONS \*\*\*\*

JAPAN 2003-108057 04/11/2003

## \*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

11/04/2006

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Verified and Acknowledged	/SIND PHONGSVIRAJATI/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	JAPAN	41	40
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## TITLE

At-home medical examination system and at-home medical examination method

FILING FEE RECEIVED 2350	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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